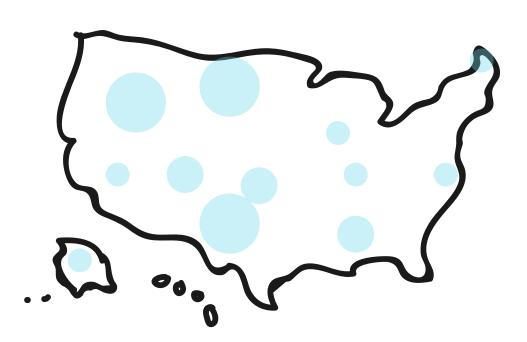
# Raider Medical Screening Society

Combatting Health Disparities in West Texas

Created by: Rebecca Joseph



## **USA**



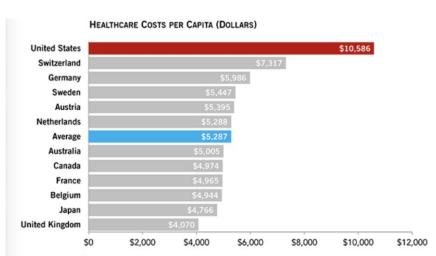
Gross National Product: Rank #1

Healthcare Expenditure: \$3.6 trillion

Life Expectancy: Rank #35

### How do we compare?

PGPF.ORG



SOURCE: Organisation for Economic Cooperation and Development, OECD Health Statistics 2019, July 2019.

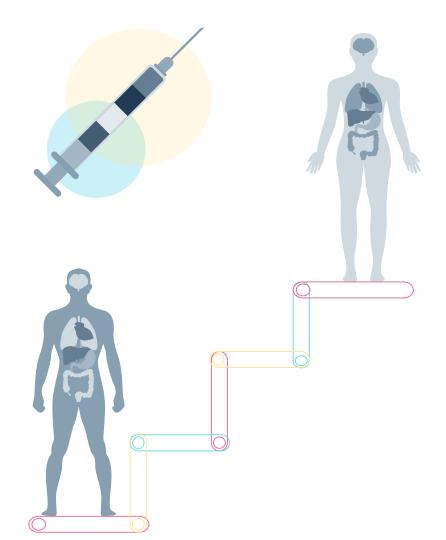
NOTES: Data are for 2018. Chart uses purchasing power parities to convert data into U.S. dollars. Average is for other wealthy OECD countries with above median GDP and above median GDP per capita.

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SOURCE: Organisation for Economic Cooperation and Development, OECD Health Statistics 2019, July 2019. NOTES: Data are not available for all countries for all metrics. Data are for 2017 or latest available. © 2019 Peter G, Peterson Foundation

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### Health Inequity

A *voidable* inequalities in health between groups of people within countries and between countries.

### A Vicious Cycle



Racially Distributed FHA Loans 1960's



No commercial base



Low community tax





Separation of people of color into neglected neighborhoods



No banks, no shops, and low quality healthcare



Feedback into schools poor education





Probability of staying in these areas increase





Community begins going downhill and no one invests

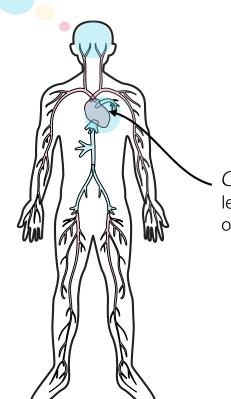








# Additions to the Cycle







Chronic Stress leads to increased levels of cortisol and adrenaline.

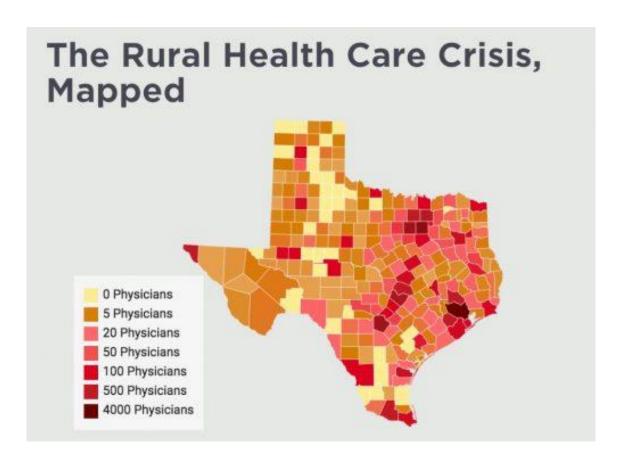








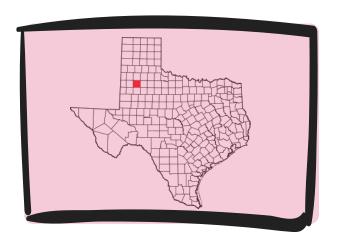
### West Texas

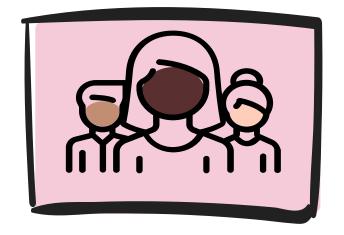


- Provider Shortage
- 35 counties with no physicians at all
- Shortage of Primary Care
   Physicians are expected to increase 67% by 2030

### Lubbock

- Close to 18% of Lubbock county resides below the poverty line
- 15.4% of adults are medically uninsured under the age of 65
- 33,000 diagnosed with diabetes each year
- 85,000 diagnosed with prediabetes
- 26% of population is obese





### Study by University of Cambridge

#### **DELAY OF TREATMENT: 3 YEARS**

22.4 percent with type 2 diabetes would experience a cardiovascular disease event, such as stroke or heart bypass surgery.

#### **DELAY OF TREATMENT: 6 YEARS**

25.9 percent with type 2 diabetes would experience a CDE. With screening and routine care, only 18.4 percent would experience a cardiovascular disease event at 10 years after baseline.

### MORTALITY WITH AND WITHOUT SCREENINGS

The simulated incidence of all-cause mortality was 16.4 percent with a delay of three years and 18.2 percent with a delay of six years, compared to 14.6 percent for screening and treatment.

#### MODEL AT 10 YEARS

With undiagnosed type 2 diabetes, screening would be associated with a 29% reduction in relative risk of a cardiovascular disease event compared with a delay of six years in diagnosis and treatment.

### RMSS: Screenings



- Take basic vitals to detect precursory symptoms of cardiovascular disease for lowincome population
- Undergraduate Pre-Health Students gain experience and interpersonal skills
- Reduced ER visits and readmission rates

### Where we are TODAY?

- New organization: Started Screenings in late January/February 2020
- Made connections with temporary housing shelters & community assistance organizations
- COVID-19 and shutdown
- Partnership with ULabs Makerspace and drsonline.org (telehealth platform)

Referral Program with Larry Combest Clinic

### RMSS: Health Education



- Keep our members educated
- Educating the community
  - Healthy Food/Cooking Interest
     Group
  - Insurance Sign-Ups

### RMSS: Volunteering

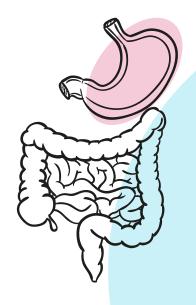


- Volunteering at Organizations in Lubbock
- Making Face Shields to help with the COVID-19 pandemic

### RMSS: Outreach



 Lubbock High School Outreach Project

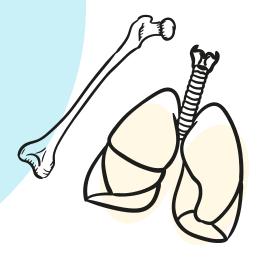


# THANKS!

Healthcare should be a right, not a privilege. The first step towards better health care for all is recognizing where we are lacking and seeing what you can do to fix it!

Rebecca Joseph

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